	. 74. 6	Substitute for Form PTO-875						less it displays a valid OMB control number. Application of Docket Number		
	APF	APPLICATION AS FILED - PART I					09/934/71			
		(Column 1) (Column 2)			. Change -		OTUC	0.70		
•	FOR BASIC FEE	NUMBER FILED	NUMBER EXTRA		MALL ENTITY	OR	SMALI	R THAN L ENTITY		
	(37 CFR 1.16(a), (b), or (c)) SEARCH FEE		THOMBER EXTRA	RATE	(\$) FEE (\$		RATE (\$)	600		
	(37 CFR 1.16(k), (i), or (m))					_]	107	FEE (\$)		
	EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))					7		 		
	TOTAL CLAIMS (37 CFR 1.16(I))	† 				7 .		 		
	INDEPENDENT CLAIMS (37 CFR 1.16(h))	minus 20 =	•	X		7		 		
		If the specifical	•	×		OR	Х =			
	APPLICATION SIZE	If the specification and d sheets of paper, the app is \$250 (\$125 for small o	rawings exceed 10	0		4 1	х =			
	(37 CFR 1.16(s))	additional 50 chasts	rilly) for each	'		1 1				
	Aug Tra		·		1 1	.	1			
	CE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))					1 1				
	 If the difference in column 1 is less than zero, enter "0" in column 2. 			-J L		1 L				
	APPLICATION AS AMENDED - PART II			TOTAL] _	TOTAL			
	1			-	L					
	(Colu	mn 2) · (Column 3)	0141			07:	1			
	REMAINING HIGHEST			J	ENTITY	OR -	OTHER T SMALL EN	HAN NITY		
	AFTER AMENDMENT PREVIOUSLY EXTRA Total (37 CFR 1.16(h)) Independent (37 CFR 1.16(h)) Minus			RATE (\$)	ADDI-	- 1	RATE (\$)	ADDI-		
-	(37 CFR 1.16(i))	Minus "	=	1	TIONAL FEE (\$)	- 1	- (,,	TIONAL		
-	Z (37 CFR 1.16(h))	Minus	-	× 25=		OR X	50=	FEE (\$)		
-	Application Size Fee (37 CFR 1.16(s))			\$ 100 =		OR X	700	=		
-	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					»\ \-	300 =			
			(37 CFR 1.16(j))			OR				
L	(Column 1)			TOTAL ADD'L FEE		OR ADD				
Γ.	CLAIN	IS (Column	12) (Column 3)	•		OR ADI	D'L FEE			
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AMENI	Application Size Foo (27 o-	Minus	=	X =	c	R X	=			
⋖	Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))			X =	0	R X	=			
	MEGENTATION OF MUL	TIPLE DEPENDENT CLAIM (37	CFR 1.16(j))							
				TOTAL		₹				
	 If the entry in column 1 is less If the "Highest Number Previo" If the "Highest Number Provio 	wite :0: :-	ADD'L FEE	OF	R TOTAL					
	If the "Highest Number Previo If the "Highest Number Previo If the "Highest Number Previous The "Highest Number Previous	usly Paid For IN THIS SPAC	E is less than 20, ente	er *20*.						

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the use on the amount of time you require to completed application form to the USPTO. Time will vary depending upon the individual case, Any comments and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

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